ARIZONA STATE BOARD OF HEALTH BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH County Affacture City Affacture State Affacture (It) Which occurred in a hopfligh or institution, give its NAME instead of street and number of childs Affacture (It) Which occurred in a hopfligh or institution, give its NAME instead of street and number of childs affacture 3. Sea				
1. PLACE OF BIRTH BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH State Augusticated No. Registered No. Register			·	
County Agas Medical Certificate of Birth County Agas Medical Certificate of Birth County Agas Medical Certificate of Birth City Medical Medical Medical Certificate of the Medical Country (II birth occurred in a hopping or institution, give its NAME instead of street and number) 2. Full name of child Adams Charles Adams (II child is not yet named, make supplemental report, as directed 3. Sex If planta Arwing the foreign of the birth of this child, who was a mone as a silk mill. 9. Full term. The full term. The matter of the birth of this child, who was was done, as spinner, work done, as spinner, work done, as spinner, work was done, as spinner, work done, as				
Township City State Annual (If birth occurred in a horning or institution, give its NAME instead of street and number) 2. Full name of child Annual Character at Mallance [If child is not yet named, make applemental report, as directed and number) 2. Full name of child is not yet named, make and number [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make applemental report, as directed and number) [If child is not yet named, make and number) [If child is not yet named, make and number) [If child is not yet named, make and number) [If child is not yet named, make and state) [If convention, it is industry or business in which work was done, as silk mill, succession, or particular bind, or of work done, as housekeeper. You append in this work appendix appendi	I. PLACE OF BIRTH		Registered No	
City Manuel No. (If birth occurred in a hophity) or institution, give its NAME instead of street and number) 2. Full name of child NOMEN CHANGS Almelene [If child is not yet named, make supplemental report, as directed and number) 3. Sex If plural trivin, triplet, or other. 6. Premature 7. Legitibirth Shumber, in order of birth Full term. 7. Legitibirth Dirth Shumber, in order of birth Iname 18. Date of March Shumber, in order of birth Iname 19. Fall term. 19. Fall	ana	A	_ , .	
City Man of child NOMEN Charles and number (1) birth occurred in a hopsited or institution, give its NAME instead of street and number (1) fi child is not yet named, make supplemental report, as directed and number (1) fi child is not yet named, make supplemental report, as directed and number (1) fi child is not yet named, make supplemental report, as directed number of child and number (1) fit child is not yet named, make supplemental report, as directed number of child and number (1) fit child is not yet named. S. Date of Sulfy E. Date of S				
2. Full name of child I name (Acardes Analysis (Superinsental report, as directed supplemental report, as directed supplemental report, as directed supplemental report. 3. Sex	City	Johns No.	bottled as inclination of the NAME hashed of start and an inclination	
3. Sex If plural births 1. Ivin, triplet, or other 6. Premature 7. Legitimate? 1.	2 Full name of child J howard (Marles allierve) If child is not yet named, make			
10. Residence (usual place of abode) (II nonresident, give place and State) 11. Color or raceCall 12. Age at last birthday 31 (Years) 12. Age at last birthday 31 (Years) 13. Birthplace (city or place) (State or country) 14. Trade, profession, or particular sawyer, bookkeeper, etc. 15. Industry or business in which work was done, as silk mill. 16. Date (month and year) last engaged in this work 17. Total time (years) 27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 7 (b) Born alive but now dead. 28. If stillborn, period of gestation period of gestation gestation for midwife, then the father, householder, cite, should make this return. (Signed) (Signed) (State or country) 22. Birthplace (city or place) (State or country) 23. Trade, profession, or particular thing 32 (Years) 24. Industry or business in which work was done, as own home. 25. Date (month and year) last engaged in this work 26. Total time (years) spent in this work 27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living 7 (b) Born alive but now dead. 28. If stillborn, period of gestation period of gestation for midwife, then the father, householder, cite, should make this return. (Signed) (Signed) (Signed) (Signed) (Signed) (Signed) (Signed) (Date of) Advantage.		Y	remature 7. Legiti- 8. Date of Quely 8, 1930	
(If nonresident, give place and State) And Midwife 11. Color or race Add 22. Age at last birthday 27 (Years) 12. Birthplace (city or place) And Add 27. Age at last birthday 27 (Years) 13. Birthplace (city or place) And Address And State) And Midwife Address And Addre		Shrewe	maiden (1)	
13. Birthplace (city or place) (State or country) (State or country) 14. Trade, profession, or particular states of work done, as submer, sawyer, bookkeeper, etc. 15. Industry or business in which work was done, as silk mill. 16. Date (month and year) last engaged in this work 17. Total time (years) 27. Number of children of this mother (At time of this hirth and including this child) (a) Born alive and now living. 28. If stillborn, months or weeks 19. Cause of stillbirth period of gestation. 29. Cause of stillbirth or midwife, then the father, householder, or midwife, then the father, householder, ct., should make this return. (State or country) 22. Birthplace (city or place) (State or country) 23. Trade, profession, or particular stand of work done, as own home, lawyer's office, silk mill, stc. 24. Industry or business in which work was done, as own home, lawyer's office, silk mill, etc. 25. Date (month and year) 26. Total time (years) spent in this work 27. Stillborn, last engaged in this work 28. If stillborn, months for weeks 29. Cause of stillbirth period of gestation. (Born alive or stillborn) (Signed)	10. Residence (usual place of abode) (If nonresident, give place and State) It Galum Aug. (If nonresident, give place and State) It Johns Aug.			
(State or country) (Later of work done, as spinner, cherk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (State or country) (Date of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as housekeeper, typist, nurse, clerk, etc. (A lidually of work done, as one home, lawyer's office, sik mill, etc. (B or alidually of or silk mill, etc. (Cat load of work done, as one home, lawyer's	11. Color or race (AUL) 12. Age at last birthday 39 (Years; 20. Color or race (AUL) 21. Age at last birthday 39 (Years)			
14. Trade, profession, or particular kind of work done, as spinner, sawyer, bookkeeper, etc. 15. Industry or business in which work was done, as silk mill. 16. Date (month and year) last engaged in this work 17. Total time (years) apent in this work of this hirth and including this child) (a) Born alive and now living. 7 (b) Born alive but now dead 27. Number of children of this mother (At time of this hirth and including this child) (a) Born alive and now living. 7 (b) Born alive but now dead 28. If stillbarn, period of gestation for weeks 18. If except the test of this child, who was been alive or stillborn. 29. Cause of stillbirth for this child, who was been alive or stillborn. (Born alive or stillborn)	13. Birthplace (city or pla	ice) St. Johns		
skind of work done, as siller. The sawyer, bookkeeper, etc. 15. Industry or business in which work was done, as silk mill, work was done, as silk mill, work was done, as silk mill, work was done, as own home, lawyer's office, silk mill, etc. 16. Date (month and year) last engaged in this work was done, as own home, lawyer's office, silk mill, etc. 27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living. 7 (b) Born alive but now dead (c) Stillborn. 2 28. If stillborn, period of gestation months or weeks consider the period of gestation which work and the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation which work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as a constant of the period of gestation work as done, as one which work as done, as own home, which work as done, as own hom	14 Trade profession.	or particular	23. Trade, profession, or particular kind	
27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living. 7 (b) Born slive but now dead. (c) Stillborn. 28. If stillborn, period of gestation. [months or weeks] CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE I hereby certify that I attended the birth of this child, who was Barn Alivilat His Om. on the date above stated When there was no attending physician or midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) Address Address Filed Aug 1. 1930. G. Mannaga.		, etc. Oarber	24. Industry or business in which	
27. Number of children of this mother (At time of this birth and including this child) (a) Born alive and now living. 7 (b) Born slive but now dead. (c) Stillborn. 28. If stillborn, period of gestation. [months or weeks] CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE I hereby certify that I attended the birth of this child, who was Barn Alivilat His Om. on the date above stated When there was no attending physician or midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) Address Address Filed Aug 1. 1930. G. Mannaga.	work was done, a sawmill, bank, etc.	is silk mills for a short of and	work was done, as own home,	
28. If stillbarn, period of gestation or weeks 29. Cause of stillbirth During labor CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE I hereby certify that I attended the birth of this child, who was Dann Alvilat Li30lm. on the date above stated (Born alive or stillborn) When there was no attending physician (or midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) (Date of) (Date of) During labor	16. Date (month and y engaged in this wor	rk 111. lotal time (years)	last engaged in this work 26. Total time (years)	
28. If stillborn, period of gestation for weeks 29. Cause of stillbirth During labor. CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE I hereby certify that I attended the birth of this child, who was Barn alive or stillborn. When there was no attending physician or midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) (Date of) During labor.	27. Number of children of this mother (At time of this birth and including this child)(a) Born alive and now living. 7 (b) Born alive but now dead. (c) Stillborn. 0			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE I hereby certify that I attended the birth of this child, who was Band Almilat His Olm. on the date above stated (Born alive or stillborn) When there was no attending physician (Born alive or stillborn) or midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) One of the date above stated (Born alive or stillborn) or Midwife a supplemental report. (Date of) Filed Augh 1930 9.0 Manual		29. Cause of stillbirth	Before labor	
When there was no attending physician for midwife, then the father, householder, etc., should make this return. Given name added from a supplemental report. (Date of) (Date of) (Date of) Filed Aug 1, 1930, J. A. Armino.	CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE			
Given name added from 3006-710 Address St. Grands, armount O. A. Armilo. Filed Aug. 1930 9.0 Armyo				
Given name added from 3006-710 Address St. Grands, armount O. A. Armilo. Filed Aug. 1930 9.0 Armyo	When there was no or midwife, then the etc., should make this r	attending physician father, householder, eturn,		
a drmiss Filed aug 1, 1930 J. a armso	Given name added from 52506-719			
By I. Sainsburg	J. a. Arn	ritoF		

 r_{i}

O .